

## UNITED STATES PATENT AND TRADEMARK OFFICE

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COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/814,464         | 03/21/2001          | Andrew Daiber         | NUFO 001               |

## CONFIRMATION NO. 4117

## FORMALITIES LETTER



\*OC000000006172839\*

Robert C. Hall  
BOZICEVIC, FIELD & FRANCIS LLP  
Suite 200  
200 Middlefield Road  
Menlo Park, CA 94025

Date Mailed: 06/12/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

08/08/2001 BNGUYEN1 00000110 500815 09814464

## FILED UNDER 37 CFR 1.53(b)

|           |           |
|-----------|-----------|
| 01 FC:101 | 710.00 CH |
| 02 FC:105 | 130.00 CH |
| 03 FC:103 | 684.00 CH |
| 04 FC:102 | 320.00 CH |

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).*
- Total additional claim fee(s) for this application is \$1040.
  - \$720 for 40 total claims over 20.
  - \$320 for 4 independent claims over 3 .
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 1880.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. ( 5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

*A copy of this notice MUST be returned with the reply.*

Sebilo

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## Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

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AUG 16 2001

PATENT & TRADEMARK OFFICE  
U.S. DEPARTMENT OF COMMERCE

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## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

|                   |                       |           |                       |                |            |
|-------------------|-----------------------|-----------|-----------------------|----------------|------------|
| Name (Print/Type) | Wilhelm A. Palmen Jr. | Signature | <i>Wilhelm Palmen</i> | Date           | 07-31-2001 |
|                   |                       |           | Application Number    | 09/814,464     |            |
|                   |                       |           | Confirmation Number   | 4117           |            |
|                   |                       |           | Filing Date           | March 21, 2001 |            |
|                   |                       |           | First Named Inventor  | Daiber, A.     |            |
|                   |                       |           | Examiner              | Unassigned     |            |
|                   |                       |           | Group Art             | 2881           |            |
|                   |                       |           | Attorney Docket No.   | NUFO001        |            |

### Combined Transmittal and Fee Calculation Sheet

Small Entity       Large Entity

| ENCLOSED:   | Claims                 | No. of claims as filed or after amendment | Most claims previously paid for | # Extra Claims | Rate | Totals      |
|---|------------------------|---|---------------------------------|----------------|------|-------------|
| <input checked="" type="checkbox"/> Amendment Under Rule 37 CFR § 1.115 | Total                  | 58  | 20                              | 38             | 18   | \$ 684.00   |
| <input checked="" type="checkbox"/> Pages 3                             | Independent            | 7   | 3                               | 4              | 80   | \$ 320.00   |
|   | Multiple               |   |                                 |                |      |             |
|   | Total Extra Claim Fees |   |                                 |                |      | \$ 1,004.00 |

|  |                                |
|--|--------------------------------|
| <input checked="" type="checkbox"/> Extension of time from _____ to _____                            | Fee                            |
| <input checked="" type="checkbox"/> Response to File Missing Parts (with copy of formalities letter) |                                |
| <input checked="" type="checkbox"/> Filing Fee   | Fee \$710.00                   |
| <input checked="" type="checkbox"/> Executed Declaration   | Pages 3 Surcharge Fee \$130.00 |
| <input checked="" type="checkbox"/> Other Submission of Formal Drawings (17 SHEETS TOTAL)            | Fee \$ -                       |
|  | Fee                            |
|  | Fee                            |
|  | Fee                            |
|  | Subtotal \$840.00              |

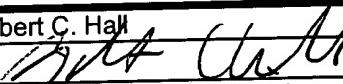
|  |         |  |                 |
|--|---------|--|-----------------|
| <input checked="" type="checkbox"/> Information Disclosure Statement |         |  |                 |
| <input checked="" type="checkbox"/> PTO Form 1449                    | Pages 1 |  |                 |
| <input checked="" type="checkbox"/> 4 Copies of Cited References     |         |  |                 |
| <input type="checkbox"/> Other _____                                 |         |  | Fee             |
|  |         |  | Subtotal \$0.00 |

|   |             |  |           |
|---|-------------|--|-----------|
| <input type="checkbox"/> Response to Notice to Comply (with copy of Notice to Comply) |             |  |           |
| <input type="checkbox"/> Sequence Listing Certification                               |             |  |           |
| <input type="checkbox"/> Paper Copy of Sequence Listing                               | Pages _____ |  |           |
| <input type="checkbox"/> Diskette in computer-readable format                         |             |  |           |
| <input type="checkbox"/> Other _____  |             |  | Fee _____ |

|   |                        |
|---|------------------------|
| <input type="checkbox"/> Terminal Disclaimer  | Fee                    |
| <input type="checkbox"/> Appeal to Board of Appeals and Appeal Communication to Group         |                        |
| <input type="checkbox"/> Notice of Appeal   | Pages _____ Fee _____  |
| <input type="checkbox"/> Appeal Brief in Triplicate   | Pages _____ Fee _____  |
| <input type="checkbox"/> Reply Brief  | Pages _____ Fee _____  |
|   | Subtotal \$ -          |
| <input type="checkbox"/> Issue Fee PTO 85B  | Fee                    |
| <input type="checkbox"/> Advance copies _____   | Fee                    |
| <input type="checkbox"/> Submission of Formal Drawings Transmittal with _____ sheets enclosed | Subtotal \$ -          |
| <input type="checkbox"/> Other Enclosures and/or Fees _____                                   | Fee _____              |
| <input type="checkbox"/> Change of Correspondence Address                                     |                        |
| <input checked="" type="checkbox"/> Return Receipt Postcard                                   | TOTAL FEES \$ 1,844.00 |

The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to my Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore. A duplicate copy of this transmittal is enclosed.

#### SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

|                         |   |                  |                                 |
|-------------------------|---|------------------|---------------------------------|
| Name (Print/Type)       | Robert C. Hall  | Registration No. | 39,209                          |
| Signature               |  | Date             | 07-31-2001                      |
| Firm Name               | Bozicevic, Field & Francis LLP  | Address          | 200 Middlefield Road, Suite 200 |
| City                    | Menlo Park  | State            | California                      |
| Telephone - Direct Dial | 650-833-7772  | Facsimile        | 650-327-3231                    |